

STATE OF MONTANA

Prepare, sign, submit with an original signature and filing fee.

APPLICATION *for* CERTIFICATE of *WITHDRAWAL of* FOREIGN PROFIT CORPORATION

MAIL: **BRAD JOHNSON**
Secretary of State
P.O. Box 202801
Helena, MT 59620-2801

PHONE: (406)444-3665
FAX: (406)444-3976
WEB SITE: *sos.mt.gov*



This is the minimum information required
(This space for use by the Secretary of State only)

Filing Fee: \$15.00

☐ **Priority Filing Add \$20.00**

For the purpose of withdrawing from the State of Montana as a profit corporation (35-1-1037, MCA) the undersigned submits the following statements of fact to the Secretary of State.

1. The name of the corporation is: _____
2. It is incorporated under the laws of: _____
3. It is not transacting business in Montana and it hereby surrenders its authority to transact business in Montana.
4. It revokes the authority of its registered agent in Montana to accept service of process on its behalf and appoints the secretary of state as its agent for service of process in any proceeding based on a cause of action arising during the time it was authorized to transact business in Montana.
5. Provide a mailing address to which the Secretary of State may mail a copy of any process against the corporation.

(Street number) (Street)

(City or town) (State) (Zip Code)
6. It will notify the Secretary of State should any other changes be made in its mailing address
7. If involved in a merger, the name of the surviving corporation is: _____
and its state of jurisdiction is: _____
8. The mailing address of the surviving corporation is: _____

(Street number) (Street)

(City or town) (State) (Zip code)

9. A certificate from the Montana Department of Revenue stating that all taxes imposed pursuant to Title 15 have been paid must be attached. You may contact them at (406) 444-6900; PO Box 5805, Helena, MT 59620-5805

The execution of any document required to be filed with the Secretary of State constitutes an affirmation, under penalties of false swearing, by each person executing the document that the facts stated therein are true. (Section 35-1-428, MCA)

Signature of Officer/Chair of Board

Title

Date (Mo/Day/Yr)

NOTE: There are important legal and accounting procedures and implications with respect to this corporate action. Suitable legal and accounting advice should be secured before submission. The Secretary of State's office encourages that such advice be sought prior to filling out forms to be sure that you understand the terms and procedures.

Application for Certificate of Withdrawal of Foreign Profit Corporation

HELP SHEET

This form is to be used to apply for a certificate of withdrawal of a foreign profit corporation.

You may request priority filing of your document. Simply mark the “priority filing” box and include an **additional \$20.00** with your filing fee. Priority filing ensures that your application will be handled within 24 hours of receipt of the document by our office.

Please type or clearly print the requested information.

Upon completion, mail this form with an **ORIGINAL SIGNATURE** and the correct filing fee to the Secretary of State, PO Box 202801, Helena, MT 59620-2801. **Make checks payable to Secretary of State.**

The Secretary of State will send a letter of acknowledgment to you once your document has been filed with our office.

If you have any questions regarding this form, please contact the Secretary of State, Business Services Bureau at (406) 444-3665.

All information provided, including names and addresses of officers and directors, will be made available on the Secretary of State’s web site or upon request.

- ❖ **There are important legal and accounting implications with respect to this corporation action. Suitable legal and accounting advice should be secured before submission. The Secretary of State’s office encourages that such advice be sought prior to filling out forms to be sure that you understand the terms and procedures.**

- ❖ **Please be advised that the Business Services Bureau of the Montana Secretary of State will process your business documents within 10 working days of initial receipt. During this period if it’s determined that your document doesn’t meet statutory requirements, a letter outlining the deficiencies will be returned to the original submitter. If the document is complete and correct, the document will be filed and an acknowledgment copy showing completion returned to the original submitter.**